

TITLE V BLOCK GRANT APPLICATION
FORMS (1-21)
STATE: MI
APPLICATION YEAR: 2006

- [FORM 1 - SF424](#)
- [FORM 2 - MCH BUDGET DETAILS](#)
- [FORM 3 - STATE MCH FUNDING PROFILE](#)
- [FORM 4 - BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED AND SOURCES OF FEDERAL FUNDS](#)
- [FORM 5 - STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES](#)
- [FORM 6 - NUMBER AND PERCENTAGE OF NEWBORN AND OTHERS SCREENED, CASE CONFIRMED, AND TREATED](#)
- [FORM 7 - NUMBER OF INDIVIDUALS SERVED \(UNDULICATED\) UNDER TITLE V](#)
- [FORM 8 - DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX](#)
- [FORM 9 - STATE MCH TOLL-FREE TELEPHONE LINE DATA](#)
- [FORM 10 - TITLE V MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT STATE PROFILE FOR FY 2004](#)
- [FORM 11 - NATIONAL AND STATE PERFORMANCE MEASURES](#)
- [FORM 12 - NATIONAL AND STATE OUTCOME MEASURES](#)
- [FORM 13 - CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CHILDREN WITH SPECIAL HEALTH CARE NEEDS](#)
- [FORM 14 - LIST OF MCH PRIORITY NEEDS](#)
- [FORM 15 - TECHNICAL ASSISTANCE \(TA\) REQUEST AND TRACKING](#)
- [FORM 16 - STATE PERFORMANCE/OUTCOME MEASURE DETAIL SHEETS](#)
- [FORM 17 - HEALTH SYSTEM CAPACITY INDICATORS \(01 THROUGH 04,07,08\) - MULTI-YEAR DATA](#)
- [FORM 18](#)
 - [MEDICAID AND NON-MEDICAID COMPARISON](#)
 - [MEDICAID ELIGIBILITY LEVEL \(HSCI 06\)](#)
 - [SCHIP ELIGIBILITY LEVEL \(HSCI 06\)](#)
- [FORM 19](#)
 - [GENERAL MCH DATA CAPACITY \(HSCI 09A\)](#)
 - [ADOLESCENT TOBACCO USE DATA CAPACITY \(HSCI 09B\)](#)
 - [OVERWEIGHT AND OBESITY DATA CAPACITY \(HSCI 09C\)](#)
- [FORM 20 - HEALTH STATUS INDICATORS 01-05 - MULTI-YEAR DATA](#)
- [FORM 21](#)
 - [POPULATION DEMOGRAPHICS DATA \(HSI 06\)](#)
 - [LIVE BIRTH DEMOGRAPHICS DATA \(HSI 07\)](#)
 - [INFANT AND CHILDREN MORTALITY DATA \(HSI 08\)](#)
 - [MISCELLANEOUS DEMOGRAPHICS DATA \(HSI 09\)](#)
 - [GEOGRAPHIC LIVING AREA DEMOGRAPHIC DATA \(HSI 10\)](#)
 - [POVERTY LEVEL DEMOGRAPHIC DATA \(HSI 11\)](#)
 - [POVERTY LEVEL FOR CHILDREN DEMOGRAPHICS DATA \(HSI 12\)](#)
- [NEW STATE PERFORMANCE AND OUTCOME MEASURES FOR NEW NEEDS ASSESSMENT PERIOD](#)

APPLICATION FOR FEDERAL ASSISTANCE		2. DATE SUBMITTED 7/15/2005	APPLICANT IDENTIFIER
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE	STATE APPLICATION IDENTIFIER
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction	4. DATE RECEIVED BY FEDERAL AGENCY	FEDERAL IDENTIFIER
5. APPLICANT INFORMATION			
Legal Name: State of Michigan		Organizational Unit: Michigan Department of Community Health	
Address (give city, county, state and zip code) 3423 North Martin Luther King Jr Blvd P.O. Box 30195 Lansing, MI 48909 County: Ingham		Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: Douglas M. Paterson Tel Number: 517-335-8928	
6. EMPLOYER IDENTIFICATION NUMBER (EIN): <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">8</div><div style="border: 1px solid black; padding: 2px 5px;">6</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">0</div><div style="border: 1px solid black; padding: 2px 5px;">1</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div>		7. TYPE OF APPLICANT: (Enter appropriate letter in box) A A. State H. Independent School District B. County I. State Controlled Institution of Higher Learning C. Municipality J. Private University D. Township K. Indian Tribe E. Interstate L. Individual F. Intermunicipality M. Profit Organization G. Special District N. Other (Specify)	
8. TYPE OF APPLICATION: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):		9 NAME OF FEDERAL AGENCY: Health Resources and Services Administration, Maternal and Child Health Bureau	
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: <div style="display: flex; gap: 10px;"><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">3</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">9</div><div style="border: 1px solid black; padding: 2px 5px;">4</div></div> TITLE: Maternal and Child Health Services Block Grant		11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT: Maternal and Child Health Services	
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.): State of Michigan			
13. PROPOSED PROJECT:		14. CONGRESSIONAL DISTRICTS OF:	
Start Date: 10/01/2005	Ending Date: 09/30/2006	a. Applicant 8th	b. Project Statewide
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?	
a. Federal	\$ <u>21,217,300.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE: b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW	
b. Applicant	\$ <u>0.00</u>		
c. State	\$ <u>38,993,900.00</u>		
d. Local	\$ <u>0.00</u>		
e. Other	\$ <u>1,000,000.00</u>		
f. Program Income	\$ <u>56,540,400.00</u>		
g. TOTAL	\$ <u>117,751,600.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT <input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No	
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.			
a. Typed Name of Authorized Representative Janet Olszewski		b. Title Director, Department of Community Health	c. Telephone Number 517-335-0267
d. Signature of Authorized Representative		e. Date Signed	

FORM 2
MCH BUDGET DETAILS FOR FY 2006

[Secs. 504 (d) and 505(a)(3)(4)]

STATE: MI

1. FEDERAL ALLOCATION

(Item 15a of the Application Face Sheet [SF 424])
Of the Federal Allocation (1 above), the amount earmarked for:

\$ 21,217,300

A.Preventive and primary care for children:

\$ 8,716,800 (41.08%)

B.Children with special health care needs:

\$ 10,126,300 (47.73%)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 504,800 (2.38%)

(The above figure cannot be more than 10%)[Sec. 504(d)]

2. UNOBLIGATED BALANCE (Item 15b of SF 424)

\$ 0

3. STATE MCH FUNDS (Item 15c of the SF 424)

\$ 38,993,900

4. LOCAL MCH FUNDS (Item 15d of SF 424)

\$ 0

5. OTHER FUNDS (Item 15e of SF 424)

\$ 1,000,000

6. PROGRAM INCOME (Item 15f of SF 424)

\$ 56,540,400

7. TOTAL STATE MATCH (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 13,507,900

\$ 96,534,300

8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 117,751,600

9. OTHER FEDERAL FUNDS

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 0

b. SSDI: \$ 0

c. CISS: \$ 0

d. Abstinence Education: \$ 1,417,132

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 131,036,900

h. AIDS: \$ 0

i. CDC: \$ 1,892,204

j. Education: \$ 0

k. Other: \$ 0

HRSA \$ 2,363,433

Preventive Block \$ 627,300

Title X \$ 7,133,200

Title XIX \$ 98,890,700

10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds under item 9)

\$ 243,360,869

11. STATE MCH BUDGET TOTAL

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 361,112,469

FORM NOTES FOR FORM 2
None
FIELD LEVEL NOTES
None

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: MI

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation (Line1, Form 2)	\$ 21,714,000	\$ 19,804,006	\$ 21,273,900	\$ 0	\$ 21,217,300	\$ 0
2. Unobligated Balance (Line2, Form 2)	\$ 0	\$ 964,642	\$ 0	\$ 0	\$ 0	\$ 0
3. State Funds (Line3, Form 2)	\$ 39,070,200	\$ 41,737,438	\$ 37,317,300	\$ 0	\$ 38,993,900	\$ 0
4. Local MCH Funds (Line4, Form 2)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds (Line5, Form 2)	\$ 1,000,000	\$ 998,514	\$ 1,000,000	\$ 0	\$ 1,000,000	\$ 0
6. Program Income (Line6, Form 2)	\$ 52,502,300	\$ 53,314,738	\$ 53,381,500	\$ 0	\$ 56,540,400	\$ 0
7. Subtotal (Line8, Form 2)	\$ 114,286,500	\$ 116,819,338	\$ 112,972,700	\$ 0	\$ 117,751,600	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds (Line10, Form 2)	\$ 225,873,500	\$ 214,767,379	\$ 218,071,300	\$ 0	\$ 243,360,869	\$ 0
9. Total (Line11, Form 2)	\$ 340,160,000	\$ 331,586,717	\$ 331,044,000	\$ 0	\$ 361,112,469	\$ 0
(STATE MCH BUDGET TOTAL)						

FORM 3
STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506(a)(1-3)]

STATE: MI

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
1. Federal Allocation <i>(Line1, Form 2)</i>	\$ 20,627,000	\$ 21,664,698	\$ 20,580,100	\$ 21,596,187	\$ 20,753,000	\$ 19,903,294
2. Unobligated Balance <i>(Line2, Form 2)</i>	\$ 0	\$ 4,751,413	\$ 0	\$ 1,460,255	\$ 0	\$ 1,595,557
3. State Funds <i>(Line3, Form 2)</i>	\$ 37,130,300	\$ 35,451,392	\$ 37,977,000	\$ 28,782,254	\$ 46,190,300	\$ 28,531,145
4. Local MCH Funds <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
5. Other Funds <i>(Line5, Form 2)</i>	\$ 900,000	\$ 662,638	\$ 750,000	\$ 826,911	\$ 750,000	\$ 886,318
6. Program Income <i>(Line6, Form 2)</i>	\$ 50,446,200	\$ 47,529,870	\$ 50,030,900	\$ 49,566,154	\$ 50,303,900	\$ 51,355,355
7. Subtotal <i>(Line8, Form 2)</i>	\$ 109,103,500	\$ 110,060,011	\$ 109,338,000	\$ 102,231,761	\$ 117,997,200	\$ 102,271,669
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
8. Other Federal Funds <i>(Line10, Form 2)</i>	\$ 186,401,200	\$ 177,115,688	\$ 190,353,000	\$ 189,628,332	\$ 194,497,500	\$ 196,897,561
9. Total <i>(Line11, Form 2)</i>	\$ 295,504,700	\$ 287,175,699	\$ 299,691,000	\$ 291,860,093	\$ 312,494,700	\$ 299,169,230
(STATE MCH BUDGET TOTAL)						

FORM NOTES FOR FORM 3

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2003
Field Note:
We expect to fully allocate our budgeted amount; however, some expenditures do not materialize resulting in the unobligated balance.
2. **Section Number:** Main
Field Name: UnobligatedBalanceExpended
Row Name: Unobligated Balance
Column Name: Expended
Year: 2004
Field Note:
Carryforward from Prior Year.
3. **Section Number:** Main
Field Name: StateMCHFundsExpended
Row Name: State Funds
Column Name: Expended
Year: 2003
Field Note:
The budgeted amount is calculated from appropriation authorization; the recognized revenue was less than the authorization resulting in the variance.
4. **Section Number:** Main
Field Name: OtherFundsExpended
Row Name: Other Funds
Column Name: Expended
Year: 2003
Field Note:
Increase revenue was received resulting in increased expenditures.

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MI

	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 308,200	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
b. Infants < 1 year old	\$ 52,502,300	\$ 53,314,738	\$ 53,381,500	\$ 0	\$ 56,540,400	\$ 0
c. Children 1 to 22 years old	\$ 10,743,700	\$ 8,578,878	\$ 9,145,900	\$ 0	\$ 8,754,800	\$ 0
d. Children with Special Healthcare Needs	\$ 41,041,600	\$ 46,510,290	\$ 40,864,700	\$ 0	\$ 43,157,400	\$ 0
e. Others	\$ 9,019,200	\$ 7,888,215	\$ 9,019,200	\$ 0	\$ 8,794,200	\$ 0
f. Administration	\$ 671,500	\$ 527,217	\$ 561,400	\$ 0	\$ 504,800	\$ 0
g. SUBTOTAL	\$ 114,286,500	\$ 116,819,338	\$ 112,972,700	\$ 0	\$ 117,751,600	\$ 0
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 800,000		\$ 800,000		\$ 0	
b. SSDI	\$ 100,000		\$ 100,000		\$ 0	
c. CISS	\$ 0		\$ 50,000		\$ 0	
d. Abstinence Education	\$ 1,899,600		\$ 1,447,500		\$ 1,417,132	
e. Healthy Start	\$ 0		\$ 627,300		\$ 0	
f. EMSC	\$ 0		\$ 391,000		\$ 0	
g. WIC	\$ 136,644,900		\$ 136,747,500		\$ 131,036,900	
h. AIDS	\$ 1,176,800		\$ 1,176,800		\$ 0	
i. CDC	\$ 1,397,200		\$ 1,844,100		\$ 1,892,204	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
HRSA	\$ 0		\$ 0		\$ 2,363,433	
Preventive Block	\$ 0		\$ 0		\$ 627,300	
Title X	\$ 0		\$ 7,133,200		\$ 7,133,200	
Title XIX	\$ 0		\$ 67,753,900		\$ 98,890,700	
HRSA, Prev. Block	\$ 964,700		\$ 0		\$ 0	
SCHIP, Title XIX , X	\$ 82,890,300		\$ 0		\$ 0	
III. SUBTOTAL	\$ 225,873,500		\$ 218,071,300		\$ 243,360,869	

FORM 4

BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MI

	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Federal-State MCH Block Grant Partnership						
a. Pregnant Women	\$ 58,200	\$ 58,200	\$ 58,200	\$ 58,200	\$ 58,200	\$ 58,200
b. Infants < 1 year old	\$ 46,397,700	\$ 50,349,028	\$ 50,030,900	\$ 50,117,450	\$ 50,303,900	\$ 51,952,718
c. Children 1 to 22 years old	\$ 14,160,000	\$ 17,076,218	\$ 14,460,000	\$ 9,071,232	\$ 16,968,700	\$ 10,041,773
d. Children with Special Healthcare Needs	\$ 38,504,300	\$ 31,696,246	\$ 34,852,500	\$ 33,043,768	\$ 40,077,500	\$ 30,383,417
e. Others	\$ 9,936,400	\$ 10,274,816	\$ 9,936,400	\$ 9,387,035	\$ 9,936,400	\$ 9,299,192
f. Administration	\$ 46,900	\$ 605,503	\$ 0	\$ 554,076	\$ 652,500	\$ 536,369
g. SUBTOTAL	\$ 109,103,500	\$ 110,060,011	\$ 109,338,000	\$ 102,231,761	\$ 117,997,200	\$ 102,271,669
II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).						
a. SPRANS	\$ 0		\$ 0		\$ 800,000	
b. SSDI	\$ 100,000		\$ 137,000		\$ 117,500	
c. CISS	\$ 50,000		\$ 145,500		\$ 150,000	
d. Abstinence Education	\$ 1,899,600		\$ 1,899,600		\$ 1,899,600	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 114,606,100		\$ 116,857,700		\$ 121,386,400	
h. AIDS	\$ 985,200		\$ 1,026,300		\$ 1,016,800	
i. CDC	\$ 920,000		\$ 950,300		\$ 1,347,400	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
HRSA	\$ 0		\$ 0		\$ 422,800	
Preventive Block	\$ 0		\$ 0		\$ 627,300	
Title X	\$ 5,265,200		\$ 5,737,100		\$ 6,916,200	
Title XIX	\$ 62,575,100		\$ 63,599,500		\$ 59,813,500	
III. SUBTOTAL	\$ 186,401,200		\$ 190,353,000		\$ 194,497,500	

FORM NOTES FOR FORM 4

None

FIELD LEVEL NOTES

1. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: PregWomenExpended
Row Name: Pregnant Women
Column Name: Expended
Year: 2004
Field Note:
Fund transfer. No MCH Block available for Prenatal Care
2. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2003
Field Note:
The State of Michigan cut the Adolescent Health Program.
3. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: Children_1_22Expended
Row Name: Children 1 to 22 years old
Column Name: Expended
Year: 2004
Field Note:
Budget amount was the best estimate at that time
4. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2003
Field Note:
Budgeted amount is the amount appropriated. Revenue available was less resulting the less expenditures.
5. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: CSHCNExpended
Row Name: CSHCN
Column Name: Expended
Year: 2004
Field Note:
Budget was best estimate at the time
6. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AllOthersExpended
Row Name: All Others
Column Name: Expended
Year: 2004
Field Note:
Budget was best estimate at the time
7. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2003
Field Note:
Cost Allocation was lower than budgeted.
8. **Section Number:** I. Federal-State MCH Block Grant Partnership
Field Name: AdminExpended
Row Name: Administration
Column Name: Expended
Year: 2004
Field Note:
Budget was best estimate at the time

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MI

TYPE OF SERVICE	FY 2004		FY 2005		FY 2006	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 58,882,700	\$ 62,014,899	\$ 56,829,800	\$ 0	\$ 58,792,500	\$ 0
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 50,666,300	\$ 50,270,664	\$ 50,666,300	\$ 0	\$ 53,546,200	\$ 0
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 4,066,000	\$ 4,006,558	\$ 4,915,200	\$ 0	\$ 4,908,100	\$ 0
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 671,500	\$ 527,217	\$ 561,400	\$ 0	\$ 504,800	\$ 0
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 114,286,500	\$ 116,819,338	\$ 112,972,700	\$ 0	\$ 117,751,600	\$ 0

FORM 5
STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MI

TYPE OF SERVICE	FY 2001		FY 2002		FY 2003	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 57,803,600	\$ 54,349,493	\$ 54,151,800	\$ 50,319,241	\$ 65,377,800	\$ 49,076,639
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 47,763,500	\$ 52,003,969	\$ 51,345,200	\$ 48,479,148	\$ 47,875,900	\$ 49,304,497
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 3,536,400	\$ 3,101,046	\$ 3,841,000	\$ 2,879,296	\$ 4,091,000	\$ 3,354,164
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 0	\$ 605,503	\$ 0	\$ 554,076	\$ 652,500	\$ 536,369
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 109,103,500	\$ 110,060,011	\$ 109,338,000	\$ 102,231,761	\$ 117,997,200	\$ 102,271,669

FORM NOTES FOR FORM 5

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: DirectHCExpended
Row Name: Direct Health Care Services
Column Name: Expended
Year: 2003
Field Note:
State of Michigan Budget Cuts
2. **Section Number:** Main
Field Name: PopBasedExpended
Row Name: Population-Based Services
Column Name: Expended
Year: 2003
Field Note:
State of Michigan Budget Cuts
3. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2003
Field Note:
Cost allocation less than budgeted.
4. **Section Number:** Main
Field Name: InfrastrBuildExpended
Row Name: Infrastructure Building Services
Column Name: Expended
Year: 2004
Field Note:
Random Moments less than anticipated

FORM 6

NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED

Sect. 506(a)(2)(B)(iii)

STATE: MI

Total Births by Occurrence: 128,456

Reporting Year: 2004

Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment(3)	
	No.	%			No.	%
Phenylketonuria	127,572	99.3	54	4	4	100
Congenital Hypothyroidism	127,572	99.3	1,349	66	66	100
Galactosemia	127,572	99.3	105	2	2	100
Sickle Cell Disease	127,572	99.3	74	74	74	100

Other Screening (Specify)

Biotinidase Deficiency	127,572	99.3	432	23	23	100
Homocystinuria	127,572	99.3	14	0	0	
Congenital Adrenal Hyperplasia (CAH)	127,572	99.3	319	8	8	100
Maple Syrup Urine Disease (MSUD)	127,572	99.3	112	2	2	100
Medium Chain AcylCo-A Dehydrogenase (MCAD)	127,572	99.3	15	6	6	100
Citullinemia/ASA	127,572	99.3	2	0	0	

Screening Programs for Older Children & Women (Specify Tests by name)

- (1) Use occurrent births as denominator.
 (2) Report only those from resident births.
 (3) Use number of confirmed cases as denominator.

FORM NOTES FOR FORM 6

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: SickCellDisease_Confirmed
Row Name: SickCellDisease
Column Name: Confirmed Cases
Year: 2006
Field Note:
Screening test for Sickle Cell is diagnostic

FORM 7
NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V
(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: MI

Reporting Year: 2004

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	15,508	97.0	0.0	0.0	0.0	3.0
Infants < 1 year old	127,572	34.7	0.0	65.3	0.0	0.0
Children 1 to 22 years old	2,441,228	80.0	0.0	0.0	0.0	20.0
Children with Special Healthcare Needs	34,452	56.6	2.7	40.4	0.3	
Others	129,349	65.0	0.0	0.0	0.0	35.0
TOTAL	2,748,109					

FORM NOTES FOR FORM 7

None

FIELD LEVEL NOTES

1. **Section Number:** Main
Field Name: PregWomen_TS
Row Name: Pregnant Women
Column Name: Title V Total Served
Year: 2006
Field Note:
The number of women served was reduced significantly from 2003 to 2004 due to the elimination by Executive Order of the Maternal and Infant Health Advocacy Services program and Medicaid Outreach Services provided by local health departments.
2. **Section Number:** Main
Field Name: Children_1_22_TS
Row Name: Children 1 to 22 years of age
Column Name: Title V Total Served
Year: 2006
Field Note:
The number of children served was reduced from 2003 to 2004 due to the elimination by Executive Order of Medicaid Outreach Services provided by local health departments.

FORM 8
DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE
XIX
(BY RACE AND ETHNICITY)
[SEC. 506(A)(2)(C-D)]
STATE: MI

Reporting Year: 2003

I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
DELIVERIES								
Total Deliveries in State	129,754	101,083	22,358	625	4,289	351	0	1,048
Title V Served	129,754	101,083	22,358	625	4,289	351	0	1,048
Eligible for Title XIX	43,621	30,232	11,732	317	959	66	0	315
INFANTS								
Total Infants in State	130,850	102,146	22,380	634	4,282	353	0	1,055
Title V Served	130,850	102,146	22,380	634	4,282	353	0	1,055
Eligible for Title XIX	43,529	30,158	11,716	316	958	66	0	315

II. UNDUPLICATED COUNT BY ETHNICITY

				HISPANIC OR LATINO (Sub-categories by country or area of origin)				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
DELIVERIES								
Total Deliveries in State	119,617	7,617	2,520	6,176	90	377	501	473
Title V Served	119,617	7,617	2,520	6,176	90	377	501	473
Eligible for Title XIX	38,250	4,646	725	3,915	52	175	236	268
INFANTS								
Total Infants in State	119,238	7,643	3,969	6,201	91	380	499	472
Title V Served	119,238	7,643	3,969	6,201	91	380	499	472
Eligible for Title XIX	38,173	4,632	724	3,903	52	175	235	267

FORM NOTES FOR FORM 8

None

FIELD LEVEL NOTES

None

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MI

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number	<u>800-262-4784</u>	<u>800-262-4784</u>	<u>800-262-4784</u>	<u>(800) 262-4784</u>	<u>(800) 262-4784</u>
2. State MCH Toll-Free "Hotline" Name	<u>800-26-BIRTH</u>	<u>800-26-BIRTH</u>	<u>800-26-BIRTH</u>	<u>(800) 26-BIRTH</u>	<u>(800) 26-BIRTH</u>
3. Name of Contact Person for State MCH "Hotline"	<u>Douglas Paterson</u>	<u>Douglas Paterson</u>	<u>Douglas Paterson</u>	<u>Douglas Paterson</u>	<u>Douglas Paterson</u>
4. Contact Person's Telephone Number	<u>517-335-8928</u>	<u>517-335-8928</u>	<u>517-335-8928</u>	<u>(517) 335-8928</u>	<u>(517) 335-8928</u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u></u>	<u>7,730</u>	<u>8,155</u>	<u>7,232</u>

FORM 9
STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)
[SECS. 505(A)(E) AND 509(A)(8)]
STATE: MI

	FY 2006	FY 2005	FY 2004	FY 2003	FY 2002
1. State MCH Toll-Free "Hotline" Telephone Number	<u>800-359-3722</u>	<u>800-788-7889</u>	<u>800-788-7889</u>	<u></u>	<u></u>
2. State MCH Toll-Free "Hotline" Name	<u>Family Phone Line</u>	<u>Family Phone Line</u>	<u>Family Phone Line</u>	<u></u>	<u></u>
3. Name of Contact Person for State MCH "Hotline"	<u>Mary Marin</u>	<u>Mary Marin</u>	<u>Mary Marin</u>	<u></u>	<u></u>
4. Contact Person's Telephone Number	<u>517-241-7197</u>	<u>517-241-7197</u>	<u>517-241-7197</u>	<u></u>	<u></u>
5. Number of calls received on the State MCH "Hotline" this reporting period	<u>0</u>	<u>0</u>	<u>31,934</u>	<u>41,780</u>	<u>46,051</u>

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

None

FORM 10
TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT
STATE PROFILE FOR FY 2006
[SEC. 506(A)(1)]
STATE: MI

1. State MCH Administration:
(max 2500 characters)

Michigan's MCH program is administered by the Department of Community Health through the Bureau of Family, Maternal and Child Health under the authority of the Public Health Code. The Bureau includes the Divisions of Family and Community Health, WIC, and Children's Special Health Care Services. The Division of Family and Community Health has responsibility for family planning, prenatal care, MCH HIV/AIDS, adolescent health, childhood lead poisoning prevention, oral health, newborn hearing screening, infant mortality initiatives and child health. The WIC Division administers the USDA Supplemental Food Program for Women, Infants and Children, as well as Project FRESH and breastfeeding initiatives. The Children's Special Health Care Division has responsibility for medical care and treatment for children with special needs, case management, ancillary services and the Parent Participation Program.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 21,217,300
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 38,993,900
5. Local MCH Funds (Line 4, Form 2)	\$ 0
6. Other Funds (Line 5, Form 2)	\$ 1,000,000
7. Program Income (Line 6, Form 2)	\$ 56,540,400
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 117,751,600

9. Most significant providers receiving MCH funds:

Specialty Care Providers
Local Health Departments
Community Non-Profit Agencies

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	15,508
b. Infants < 1 year old	127,572
c. Children 1 to 22 years old	2,441,228
d. CSHCN	34,452
e. Others	129,349

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:

(max 2500 characters)

CSHCS Medical Care and Treatment - Medical Care and Treatment includes a wide range of services such as physician care, hospitalization, pharmaceuticals, special therapies and durable medical equipment, home health nursing, and orthotics/prosthetics. Services are provided through an approved list of providers including physicians, clinics, hospitals, and home health agencies. Early Childhood Comprehensive Systems Project - This project is a component of the Governor's Great Start Initiative involving state agencies, the Ready To Succeed Partnership, Healthy Child Care Michigan Project, other public and private organizations and citizens. Partners will use research-based, technology supported methods to collaboratively assess needs, select priorities and formulate outcomes and indicators of success for early childhood.

b. Population-Based Services:

(max 2500 characters)

Newborn Screening - All newborns are screened for up to 40 disorders, including hypothyroidism, sickle cell anemia, PKU, galactosemia, MSUD, MCAD, CAH and biotinidase deficiency. Components of the program include regional coordination and training in all maternity hospitals, centralized laboratory testing and follow-up, and contracted medical management. Hearing and Vision Screening - This program screens preschool and school-age children for hearing and vision problems. Local agencies are trained to conduct the testing and provide referral, follow-up including to CSHCS otology clinics, and community education.

c. Infrastructure Building Services:

(max 2500 characters)

The Pregnancy Risk Assessment Monitoring System is a study of risk factors among women related to birth outcomes. Data is gathered through interviews with new mothers by registered nurses trained in interview techniques. The information collected includes use of birth control and prenatal care, plans for breastfeeding, use of tobacco and alcohol during pregnancy, exposure to smoke, and access to and use of information on infant care such as the importance of sleep position. Most of the data obtained through the PRAMS study are not available from any other source.

12. The primary Title V Program contact person:

Name	Douglas M. Paterson
Title	Director, Bureau of Family, Maternal and Child Health
Address	201 Townsend Street
City	Lansing
State	MI

13. The children with special health care needs (CSHCN) contact person:

Name	Kathleen Stiffler
Title	Director, Children's Special Health Care Services Division
Address	400 South Pine Street
City	Lansing
State	MI

Zip _____ 48913
Phone _____ 517/335-8928
Fax _____ 517/335-9032
Email _____ patersond@michigan.gov
Web _____

Zip _____ 48933
Phone _____ 517-335-5008
Fax _____ 517/241-8970
Email _____ stifflerk@michigan.gov
Web _____

FORM NOTES FOR FORM 10

None

FIELD LEVEL NOTES

None

FORM 11
TRACKING PERFORMANCE MEASURES
[SECS 485 (2)(2)(B)(iii) AND 486 (A)(2)(A)(iii)]
STATE: MI

PERFORMANCE MEASURE # 01

The percent of newborns who are screened and confirmed with condition(s) mandated by their State-sponsored newborn screening programs (e.g. phenylketonuria and hemoglobinopathies) who receive appropriate follow up as defined by their State.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			100	100	100
Annual Indicator			100.0	100.0	100.0
Numerator			194	196	183
Denominator			194	196	183
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 02

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CSHCN survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			61.3	61.3	64
Annual Indicator			61.3	61.3	61.3
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	61.3	61.3	61.3	61.3	61.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 03

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			55.8	55.8	58
Annual Indicator			55.8	55.8	55.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	55.8	55.8	55.8	55.8	55.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 04

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective			66.5	66.5	50
Annual Indicator			66.5	66.5	66.5
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	66.5	66.5	66.5	66.5	66.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 05

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective			75.7	75.7	79
Annual Indicator			75.7	75.7	75.7
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	75.7	75.7	75.7	75.7	75.7
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 06

The percentage of youth with special health care needs who received the services necessary to make transition to all aspects of adult life. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective			5.8	5.8	6
Annual Indicator			5.8	5.8	5.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	5.8	5.8	5.8	5.8	5.8
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 07

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	90	90	92	85	87
Annual Indicator	73.7	70.0	81.6	81.5	81.2
Numerator	147,032	185,408	166,523	158,336	152,922
Denominator	199,500	264,680	204,072	194,277	188,328
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	89	91	91	91	91
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 08

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	23.1	22.4	21.7	18	18
Annual Indicator	22.0	20.4	18.4	18.1	17.8
Numerator	4,607	4,263	3,847	3,894	3,813
Denominator	209,108	209,108	209,108	214,590	214,590
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	17.8	17.6	17.4	17.4	17.2
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 09

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	33	35	37	39	41
Annual Indicator	32.5	33.2	33.0	33.4	33.4
Numerator	43,992	43,790	42,516	41,889	41,889
Denominator	135,361	132,017	128,835	125,417	125,417
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	33.6	33.6	33.8	33.8	34
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 10

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	4.7	4.6	4.4	3.5	4.1
Annual Indicator	4.7	3.5	3.7	4.6	3.1
Numerator	102	75	79	96	65
Denominator	2,164,198	2,164,198	2,164,198	2,098,595	2,098,595
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	4.1	4	4	3.9	3.9
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 11

Percentage of mothers who breastfeed their infants at hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	60	62	69.4	69.9	70.5
Annual Indicator	63.1	68.8	72.3	75.4	78.5
Numerator	85,846	91,674	93,693	98,660	100,692
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Provisional	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	71	71.6	72.2	72.8	73
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 12

Percentage of newborns who have been screened for hearing before hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	65	90	95	100	100
Annual Indicator	73.1	80.7	92.6	90.6	90.2
Numerator	97,853	106,633	119,094	116,135	123,035
Denominator	133,815	132,152	128,624	128,126	136,436
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 13

Percent of children without health insurance.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	6	4.6	3.6	6.8	6.7
Annual Indicator	6.7	8.1	6.9	5.8	5.8
Numerator	173,916	196,000	175,117	147,257	147,257
Denominator	2,595,767	2,427,000	2,541,611	2,538,920	2,538,920
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	5.6	5.6	5.4	5.4	5.4
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 14

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	80	88.3	88.7	89.1	84.2
Annual Indicator	87.9	80.7	83.2	82.5	80.2
Numerator	709,508	707,856	707,036	739,523	792,549
Denominator	807,491	877,338	849,639	896,104	988,147
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	86	87.8	89.7	91.5	92
Annual Indicator					
Numerator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Denominator					

PERFORMANCE MEASURE # 15

The percent of very low birth weight infants among all live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	1.4	1.4	1.4	1.4	1.4
Annual Indicator	1.6	1.7	1.6	1.7	1.6
Numerator	2,133	2,222	2,103	2,235	2,111
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	1.4	1.4	1.4	1.4	1.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 16

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	9	9	8.7	8.7	8.4
Annual Indicator	6.9	8.8	8.0	6.7	8.1
Numerator	50	63	58	49	59
Denominator	719,867	719,867	723,088	728,381	728,381
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	8.1	8.1	8.1	8	8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 17

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	85	85	85.2	88	88
Annual Indicator	88.0	86.5	87.0	84.8	87.4
Numerator	1,856	1,921	1,829	1,896	1,846
Denominator	2,109	2,222	2,103	2,235	2,111
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	88.2	88.2	88.4	88.4	88.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

PERFORMANCE MEASURE # 18

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	85	85.7	85.9	85.9	85.9
Annual Indicator	80.4	82.9	83.9	84.1	82.7
Numerator	109,346	110,501	108,653	110,019	106,116
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	86.6	87.8	89	90.3	90.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 1

Infant mortality rate of live births

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		7.5	7.4	8.1	8
Annual Indicator	8.2	8.0	8.1	8.5	7.6
Numerator	1,112	1,066	1,054	1,112	969
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	7.9	7.8	7.7	7.6	7.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 2

Maternal mortality ratio in Black women

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		6.4	17	16	26.4
Annual Indicator	16.6	17.0	27.0	35.7	80.2
Numerator	4	4	6	8	18
Denominator	24,069	23,494	22,248	22,380	22,439
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	25.7	36	35	35	34
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 3

Percent of low birthweight births (<2500 grams) among live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		6.6	6.5	8.1	7.9
Annual Indicator	7.9	8.0	8.0	8.2	8.3
Numerator	10,706	10,714	10,403	10,778	10,700
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	7.8	8.2	8.1	8	7.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 4

Percent of preterm births (<37 weeks gestation) among live births

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		9.1	8.8	11.2	11.1
Annual Indicator	10.9	11.3	11.3	11.2	10.0
Numerator	14,833	15,017	14,625	14,651	12,862
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	11	11	10.9	10.9	10.8
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 5

Percent of live births resulting from unintended pregnancies.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		37.7	40.1	39.6	39.2
Annual Indicator	37.5	40.6	43.1	41.2	39.3
Numerator	51,015	54,098	55,882	53,910	50,410
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	38.7	38.7	38.3	37.8	37.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 6

Percent of repeat live births to unwed mothers 15-19 years of age

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		16.6	16.0	16.2	17.3
Annual Indicator	19.7	16.4	18.9	17.6	18.2
Numerator	2,395	2,210	2,019	1,887	1,965
Denominator	12,177	13,438	10,670	10,747	10,813
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	17.1	16.9	16.7	16.5	16.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 7

Increase the percent of CSHCS beneficiaries enrolled in a managed care Special Health Plan

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		20.0	35.0	30	30
Annual Indicator	7.1	13.2	28.0	30.0	22.3
Numerator	2,045	4,270	5,664	6,293	5,320
Denominator	28,908	32,303	20,250	21,000	23,817
Is the Data Provisional or Final?				Provisional	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	0	0	0	0	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 8

Increase the utilization of dental services by CSHCS beneficiaries (CSHCS reimbursed)

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		20.0	15	16	17
Annual Indicator	14.9	14.0	14.3	15.2	16.7
Numerator	4,320	4,508	5,060	5,164	5,747
Denominator	28,908	32,303	35,364	33,863	34,452
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	18	19	20		
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

STATE PERFORMANCE MEASURE # 18

Increase the percent of Medicaid enrolled children, 0-6 years of age, who receive lead screening

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective		4.3	4.3	25	25
Annual Indicator	17.9	19.9	17.7	18.8	47.3
Numerator	52,946	61,914	58,574	65,078	167,839
Denominator	296,312	310,516	330,421	346,239	354,928
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	60	70	80	85	90
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 11

The data source for unintended pregnancy as for breastfeeding is PRAMS (Pregnancy Risk Assessment Monitoring System). The last weighted data available is from 2002. Based on the change in percentages from 2000 to 2002, we calculated the estimated numbers for the last two years. We will update this information as soon as we will receive the 2003 PRAMS weighted data from CDC.
We used as denominator the number of live births to Michigan's residents given the source of data.

FIELD LEVEL NOTES

1. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
2. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
3. **Section Number:** Performance Measure #2
Field Name: PM02
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
4. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
5. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
6. **Section Number:** Performance Measure #3
Field Name: PM03
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
7. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
8. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
9. **Section Number:** Performance Measure #4
Field Name: PM04
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
10. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2002
Field Note:
The 2002 indicator is based on the State estimates from SLAITS.
11. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.

12. **Section Number:** Performance Measure #5
Field Name: PM05
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
13. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2002
Field Note:
Because only one of the States (Maine) met the NCHS standards for reliability for PM 6, the 2002 indicator is the national average except for Maine which has its State value noted.
14. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2003
Field Note:
The data reported in 2002 have pre-populated the data for 2003 for this performance measure.
15. **Section Number:** Performance Measure #6
Field Name: PM06
Row Name:
Column Name:
Year: 2004
Field Note:
The data reported in 2004 are pre-populated with the data from 2003 for this performance measure.
16. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2002
Field Note:
The data for 2002 is not available.
17. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2003
Field Note:
Neither actual or estimated immunization data is currently available for 2003. National Immunization Survey data is used and will become available later in the year.
18. **Section Number:** Performance Measure #7
Field Name: PM07
Row Name:
Column Name:
Year: 2004
Field Note:
2004 data will not be available from CDC until August.
19. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2003
Field Note:
Data source for 2003 is the Oral Health Validation Survey, May-July, 2003
20. **Section Number:** Performance Measure #9
Field Name: PM09
Row Name:
Column Name:
Year: 2004
Field Note:
2004 data is based on the 2003 Validation Survey. The survey will not be repeated until next year.
21. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were adjusted for the following years (2004-2008) based on the data reported for the prior years (including preliminary data for 2003).
22. **Section Number:** Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2004
Field Note:
Data for 2004 are based on incomplete death files at this time
23. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2002
Field Note:
No data is available for 2001 and 2002.

24. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2003
Field Note:
For the 2000 calculation, the numerator was from PRAMS and thus the percent changed by using as the denominator the total number of live births (higher than PRAMS estimate). For 2001 calculation, the PRAMS estimated percent was considered and the numerator was calculated based on the number of total live births reported.
25. **Section Number:** Performance Measure #11
Field Name: PM11
Row Name:
Column Name:
Year: 2004
Field Note:
The data source for breastfeeding is PRAMS. The last weighted data available is from 2002. Based on the change in percentages from 2000 to 2002, we calculated the estimated numbers for the last two years (2003, 2004). We will update this information as soon as we receive the 2003 PRAMS weighted data from CDC.
26. **Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2002
Field Note:
Data for 2002 is not available
27. **Section Number:** Performance Measure #13
Field Name: PM13
Row Name:
Column Name:
Year: 2003
Field Note:
Michigan utilizes estimates of uninsured data developed by EBRI based on the Current Population Survey of March 2003. An annual update will be completed later in the year.
The annual performance objectives for 2003 and for the following years were changed based on the data reported for the prior years (1999-2002).
28. **Section Number:** Performance Measure #14
Field Name: PM14
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives for the following years (2004-2008) were re-calculated based on the data reported for the prior years (1999-2002).
29. **Section Number:** Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives for the following years were changed/adjusted based on the data reported for the prior years (1999-2003).
30. **Section Number:** State Performance Measure #1
Field Name: SM1
Row Name:
Column Name:
Year: 2003
Field Note:
There is an increase of IMR in 2003 but the data is very preliminary. Therefore, given our goal to decrease it, the annual performance objectives for the following years (2004-2008) were re-calculated based on the final data reported for 1999-2002.
31. **Section Number:** State Performance Measure #2
Field Name: SM2
Row Name:
Column Name:
Year: 2002
Field Note:
The number of maternal deaths in Black women is too small to statistically calculate a rate or a ratio. The ratio generated by the system based on the number for the numerator would have a very large variation and can not be compared to the ratio in other years. Data for 2002 is not available at this time.
32. **Section Number:** State Performance Measure #2
Field Name: SM2
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives for the following years were re-calculated based on the final data reported for 1999-2002 given that 2003 is very preliminary (both, the numerator and the denominator).
33. **Section Number:** State Performance Measure #3
Field Name: SM3
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were re-calculated based on the final data reported for 1999-2002, given that 2003 data is very preliminary.
34. **Section Number:** State Performance Measure #4
Field Name: SM4
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were re-calculated based on the data reported for 1999-2003.
35. **Section Number:** State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2002

Field Note:

No data is available for the year 2001 and 2002.

36. Section Number: State Performance Measure #5

Field Name: SM5

Row Name:

Column Name:

Year: 2003

Field Note:

In 2000 the numerator considered was from PRAMS and therefore the percent was lower when the total number of live births was used as denominator.

The calculation for 2001 considered the percent estimated by PRAMS and the numerator was calculated based on the total live births reported.

The targets for 2002-2008 were changed based on the data reported for 1999-2001.

37. Section Number: State Performance Measure #6

Field Name: SM6

Row Name:

Column Name:

Year: 2003

Field Note:

The annual performance objectives for 2004-2008 were calculated based on the data reported for 1999-2003.

38. Section Number: State Performance Measure #7

Field Name: SM7

Row Name:

Column Name:

Year: 2002

Field Note:

The denominator for 2002 is changed to only those CSHCS-enrolled persons living in counties with an active SHP. The previous denominator included all CSHCS-enrolled persons, whether or not an SHP was available to them.

FORM 12
TRACKING HEALTH OUTCOME MEASURES
[SECS 505 (A)(2)(B)(iii) AND 506 (A)(2)(A)(iii)]
STATE: MI

OUTCOME MEASURE # 01

The infant mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	7.5	7.5	7.4	8.1	8
Annual Indicator	8.2	8.0	8.1	8.5	7.6
Numerator	1,112	1,066	1,054	1,112	969
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	7.9	7.8	7.7	7.6	7.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 02

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	2.3	2.5	2.4	2.4	2.4
Annual Indicator	3.0	2.8	3.1	2.6	3.3
Numerator	18.2	16.9	18.4	17.5	17.2
Denominator	6.1	6.1	6	6.7	5.2
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	2.4	2.3	2.3	2.3	2.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 03

The neonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	4.5	4.5	4.5	4.5	5.6
Annual Indicator	5.7	5.5	5.6	5.9	5.3
Numerator	777	729	719	771	684
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	5.5	5.4	5.4	5.3	5.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 04

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2000	2001	2002	2003	2004
Annual Performance Objective	2.5	2.5	2.5	2.5	2.5
Annual Indicator	2.5	2.5	2.6	2.6	2.2
Numerator	335	337	335	341	285
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2005	2006	2007	2008	2009
Annual Performance Objective	2.5	2.4	2.4	2.3	2.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 05

The perinatal mortality rate per 1,000 live births plus fetal deaths.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	9	8.8	8.7	8.6	9.8
Annual Indicator	10.5	10.3	10.1	7.0	6.7
Numerator	1,440	1,374	1,318	916	856
Denominator	136,835	134,033	130,266	131,144	128,571
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	9.8	9.7	9.6	9.6	9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

OUTCOME MEASURE # 06

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2000	2001	2002	2003	2004
Annual Performance Objective	25	24.7	24.7	24.5	19.4
Annual Indicator	21.6	21.2	21.2	21.1	18.5
Numerator	439	432	431	417	364
Denominator	2,033,010	2,033,010	2,033,010	1,972,042	1,972,042
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2005	2006	2007	2008	2009
Annual Performance Objective	18.8	18.1	17.5	16.9	16.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

FORM NOTES FOR FORM 12

None

FIELD LEVEL NOTES

1. **Section Number:** Outcome Measure 1
Field Name: OM01
Row Name:
Column Name:
Year: 2003
Field Note:
There is an increase of IMR in 2003 but the data is very preliminary. Therefore, given our goal to decrease it, the annual performance objectives for the following years (2004-2008) were re-calculated based on the final data reported for 1999-2002.
2. **Section Number:** Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were changed based on the data reported for 1999-2003.
3. **Section Number:** Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were changed based on the data reported for the prior years (1999-2002). 2003 data is very preliminary yet.
4. **Section Number:** Outcome Measure 4
Field Name: OM04
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were changed based on the data reported for 1999-2002. 2003 data is considered preliminary.
5. **Section Number:** Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were changed based on the data reported for 1999-2003.
6. **Section Number:** Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2003
Field Note:
The annual performance objectives were changed based on the data reported for 1999-2003.

FORM 13
CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS
STATE: MI

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

1

Total Score: 16

Rating Key

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

FORM NOTES FOR FORM 13

None

FIELD LEVEL NOTES

None

FORM 14
LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

STATE: MI FY: 2006

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1. Establish a system to better identify, screen and refer for maternal depression.
2. Increase the rate and duration of breastfeeding.
3. Reduce the percentage of unintended and teen pregnancies.
4. Reduce the percentage of preterm births and births with low birth weight.
5. Establish a medical home and increase care coordination for children with special health care needs.
6. Increase the number of CSHCS enrolled youth who have appropriate adult health care providers.
7. Reduce the proportion of children and adolescents who are obese.
8. Reduce the incidence of teen suicide.
9. Increase the testing rate of low-income children for lead poisoning.
10. Reduce the racial disparity between black and white infant mortality rate and between Native American and white infant mortality rate.

FORM NOTES FOR FORM 14

None

FIELD LEVEL NOTES

None

FORM 15
TECHNICAL ASSISTANCE(TA) REQUEST

STATE: MI

APPLICATION YEAR: 2006

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	National Performance Measure Issues If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>03</u>	Reimbursement for medical home services	One of the major impediments to implementing the medical home concept is the determination of adequate reimbursement to physicians for the cost of medical home services	Catalyst Center - Debbie Allen
2.	Data-related Issues - Performance Indicators If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	None	None	None
3.	Other If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	Training on Cultural Competence	Need to assess the effectiveness of our programs in reaching populations with different language, custom characteristics	National Center for Cultural Competence
4.	Other If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>N/A</u>	None	None	None
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
7.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this			

	issue pertains by entering the measure number here: _____			
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: _____			

FORM NOTES FOR FORM 15

None

FIELD LEVEL NOTES

None

FORM 16
STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: MI

SP # 1

PERFORMANCE MEASURE:

Infant mortality rate of live births

STATUS:

Active

GOAL

To reduce the number of infant deaths.

DEFINITION

Numerator:

Number of deaths to infants from birth through 364 days of age

Denominator:

Number of live births

Units: 1000 **Text:** rate

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital records and Health Statistics, MDCH INFANT MORTALITY RATE (1/1,000 LIVE BIRTHS) 1996 1997 1998 1999 2000 Infant mortality rate 8.0 8.1 8.2 8.0 8.2 (1/1,000) Non-Hispanic White 5.9 6.0 6.2 5.8 5.9 Non-Hispanic Black 17.4 17.5 16.7 17.9 18.2

SIGNIFICANCE

Baseline: 8.2 infant deaths per thousand of live births in Michigan, 2000. Higher than national average and 80% higher than the Healthy People 2010 objective. A significant racial disparity exists.

SP # 2

PERFORMANCE MEASURE:

Maternal mortality ratio in Black women

STATUS:

Active

GOAL

To reduce the maternal mortality ratio in Black women

DEFINITION

Numerator:

Number of deaths to Black women while pregnant or within 42 days of termination from a cause related or aggravated by the pregnancy or its management, but not from accidental or incidental causes.

Denominator:

Number of live births to Black women

Units: 100000 **Text:** ratio

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, MDCH MATERNAL MORTALITY RATIO (100,000 LIVE BIRTHS) 1996 1997 1998 1999 2000 Mortality ratio 3.9 9.3 6.2 8.2 6.6 (1/100,000) Number by race White* 2 6 2 8 5 Black* 3 6 5 3 4

SIGNIFICANCE

Baseline: 6.6 maternal deaths per 100,000 live births in Michigan, 2000. A significant racial disparity exist with maternal deaths. The number of maternal deaths in Black women contributed a big portion of the overall maternal mortality ratio in Michigan.

SP # 3

PERFORMANCE MEASURE:

Percent of low birthweight births (<2500 grams) among live births.

STATUS:

Active

GOAL

To reduce the number of live births with low birthweight

DEFINITION

Numerator:

Number of live births with birthweight less than 2500 grams

Denominator:

Number of live births

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, MDCH PERCENT OF LIVE BIRTHS WITH LOW BIRTH WEIGHT (LESS THAN 2500 GRAMS) 1996 1997 1998 1999 2000 N % N % N % N % N % Total 10228 7.7 10335 7.8 10468 7.9 10703 8.0 10706 7.9 Non-Hispanic White 6384 6.4 6439 6.6 6424 6.5 6393 6.5 6385 6.4 Non-Hispanic Black 3270 13.6 3194 13.3 3336 13.9 3495 14.7 3508 14.6 American Indian 43 6.1 44 6.0 47 6.8 45 6.7 38 6.0 Asian/Pacific Islander 148 6.1 214 7.7 231 7.7 280 8.4 244 6.7 Hispanic 307 6.1 365 6.7 389 6.5 415 6.7 431 6.2

SIGNIFICANCE

Baseline: 7.9 percent of live births weight (less than 2,500 grams) in Michigan, 2000. The percent of live births with low birthweight for Non-Hispanic Black live birhs is twice that for Non-Hispanic White live births and all other racial groups.

SP # 4

PERFORMANCE MEASURE:

Percent of preterm births (<37 weeks gestation) among live births

STATUS:

Active

GOAL

To reduce the percentage of preterm births (less than 37 weeks of gestational age)

DEFINITION

Numerator:

Number of preterm infants with less than 37 weeks of gestational age

Denominator:

Number of live infants

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics Michigan Department of community Health PERCENT OF PRETERM INFANTS (LESS THAN 37 WEEKS OF GESTATIONAL AGE) 1996 1997 1998 1999 2000 N % N % N % N % N % Total 13778 10.3 14319 10.7 14646 11.0 14368 10.8 14833 10.9 Non-Hispanic White 8919 8.9 9277 9.3 9561 9.6 9326 9.5 9579 9.6 Non-Hispanic Black 3985 16.6 4019 16.6 4033 16.7 3985 16.8 4023 16.8 American Indian 77 9.9 85 11.7 84 12.1 68 10.1 72 11.4 Asian/Pacific Islander 219 9.1 264 9.5 299 10.0 297 8.9 342 9.4 Hispanic 505 10.0 597 11.0 636 10.7 627 10.1 722 10.4

SIGNIFICANCE

Baseline: 10.9 percent of pre-term births among all live births in Michigan 2000. The current percent of preterm births is about 45% higher than the Healthy People 2010 objective. The percent of pre-term infants for Non-Hispanic Black is 1.7 times that for Non-Hispanic White, and much higher than other racial groups.

SP # 5

PERFORMANCE MEASURE:

Percent of live births resulting from unintended pregnancies.

STATUS:

Active

GOAL

To reduce the percent of live births resulting from unintended pregnancies

DEFINITION

Number of live births resulting from unintended pregnancies divided by total number of live births multiplied by 100.

Numerator:

Number of live births which result from unintended pregnancies

Denominator:

Number of live births

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Pregnancy Risk Assessment Monitoring System (PRAMS) Michigan Department of Community Health PERCENT OF LIVE BIRTHS RESULTED FROM UNINTENDED PREGNANCIES 1996 1997 1998 1999 2000 Unintended pregnancies 43.1% 43.2% 41.8% 39.8% 40.2% RACE Black 71.0% 69.0% 68.2% 67.9% 64.0% Non-Black 37.0% 38.4% 37.0% 35.0% 35.8% AGE < 20 84.3% 81.3% 73.7% 86.1% 70.7% 20 - 29 42.6% 44.9% 46.0% 41.0% 42.2% 30 + 28.1% 27.2% 22.6% 24.8% 27.1%

SIGNIFICANCE

Baseline:40.2 percent of live births resulting from unintended pregnancies in Michigan, 2000. Significant disparities between racial and age groups.

SP # 6

PERFORMANCE MEASURE:

Percent of repeat live births to unwed mothers 15-19 years of age

STATUS:

Active

GOAL

To reduce the percent of repeat live births to unwed mothers 15-19 years of age

DEFINITION

Numerator:

Number of repeat live births to unwed mothers 15 through 19 years old

Denominator:

Number of live infants to unwed mothers 15 through 19 years old

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, Michigan Department of Community Health PERCENT OF REPEAT LIVE BIRTHS TO UNWED MOTHERS (15 THROUGH 19 YEARS OLD) 1996 1997 1998 1999 2000 N % N % N % N % N %
Total 2762 19.6 2683 20.1 2644 19.7 2419 19.4 2395 19.7 Non-Hispanic White 1030 13.6 1039 14.3 1069 14.4 975 14.1 1016 15.2 Non-Hispanic Black 1521 28.1 1435 28.0 1337 27.2 1203 26.9 1151 26.3 American Indian 29 20.1 22 18.6 19 15.7 32 29.9 21 20.4 Asian/Pacific Islander 9 13.6 9 14.1 11 13.3 16 19.0 15 18.3 Hispanic 166 20.1 168 22.5 199 24.2 181 21.8 182 21.8

SIGNIFICANCE

Baseline: 19.7 percent of live births to unwed teen mothers were repeat births in Michigan, 2000. The percent of repeat live births to unwed Non-Hispanic Black mothers is much higher than other racial groups.

SP # 7

PERFORMANCE MEASURE:

Increase the percent of CSHCS beneficiaries enrolled in a managed care Special Health Plan

STATUS:

Active

GOAL

To increase the percent of CSHCS beneficiaries enrolled in a managed care Special Health Plan

DEFINITION

Number of CSHCS beneficiaries enrolled in a Special Health Plan divided by the total number of CSHCS-enrolled beneficiaries living in counties with active SHPs times 100.

Numerator:

Number of CSHCS beneficiaries enrolled in a Special Health Plan

Denominator:

Total number of CSHCS-enrolled beneficiaries living in counties with active SHPs

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

CSHCS Division Michigan Department of Community Health

SIGNIFICANCE

Enrollment into SHPs promotes establishing a medical home for CSHCS beneficiaries and increases care coordination

SP # 8

PERFORMANCE MEASURE:

Increase the utilization of dental services by CSHCS beneficiaries (CSHCS reimbursed)

STATUS:

Active

GOAL

To increase the utilization of dental services by CSHCS beneficiaries (CSHCS reimbursed)

DEFINITION

Numerator:

Number of CSHCS beneficiaries who received dental services reimbursed by CSHCS

Denominator:

Total number of CSHCS beneficiaries

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES CSHCS Division Michigan Department of Community Health

SIGNIFICANCE

SP # 18

PERFORMANCE MEASURE:

Increase the percent of Medicaid enrolled children, 0-6 years of age, who receive lead screening

STATUS:

Active

GOAL

To increase the percent of Medicaid enrolled children 0-6 years of age who receive lead screening

DEFINITION

Numerator:

Number of Medicaid enrolled children 0-6 years of age who receive lead screening

Denominator:

Total number of Medicaid enrolled children 0-6 years of age

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division of Family and Community Health Michigan Department of Community Health

SIGNIFICANCE

In 2001, there were 52,946 (17.9%) among 296,312 Medicaid enrolled children 0 to 5 years of age received lead screening.

FORM NOTES FOR FORM 16

None

FIELD LEVEL NOTES

None

FORM 17
HEALTH SYSTEMS CAPACITY INDICATORS
FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA
STATE: MI

HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	48.1	49.4	45.4	NaN	
Numerator	3,230	3,319	3,010	0	
Denominator	672,005	672,005	663,586	0	
Is the Data Provisional or Final?				Provisional	

HEALTH SYSTEMS CAPACITY MEASURE # 02

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	72.0	72.9	79.4	79.7	79.7
Numerator	40,507	43,554	47,957	49,578	49,578
Denominator	56,238	59,718	60,392	62,203	62,203
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 03

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator			NaN	NaN	79.2
Numerator			0	0	486
Denominator			0	0	614
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 04

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	74.2	77.2	77.5	77.5	75.1
Numerator	100,954	102,888	100,408	101,456	96,278
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

HEALTH SYSTEMS CAPACITY MEASURE # 07

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	31.9	40.5	42.6	44.2	44.5
Numerator	57,207	73,264	79,193	84,001	84,595
Denominator	179,241	181,106	185,858	190,029	190,029
Is the Data Provisional or Final?				Final	Final

HEALTH SYSTEMS CAPACITY MEASURE # 08

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	21.4	24.1	25.6	23.7	24.3
Numerator	6,247	6,961	7,517	7,293	7,613
Denominator	29,180	28,850	29,340	30,808	31,336
Is the Data Provisional or Final?				Final	Final

FORM NOTES FOR FORM 17

None

FIELD LEVEL NOTES

1. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2002
Field Note:
Data for 2002 is not available
2. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2003
Field Note:
2003 data is being compiled and will not be available until August.
3. **Section Number:** Health Systems Capacity Indicator #01
Field Name: HSC01
Row Name:
Column Name:
Year: 2004
Field Note:
2004 data will not be available until later this year.
4. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2002
Field Note:
Encounter data is being collected for the first time in 2003. Data for 2002 and earlier is not available
5. **Section Number:** Health Systems Capacity Indicator #03
Field Name: HSC03
Row Name:
Column Name:
Year: 2003
Field Note:
Unexpected problems have resulted in MI Child service data not yet available in Michigan.

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #05
(MEDICAID AND NON-MEDICAID COMPARISON)
STATE: MI

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2003	Payment source from birth certificate	<u>9.5</u>	<u>7.5</u>	<u>8.2</u>
b) Infant deaths per 1,000 live births	2003	Payment source from birth certificate	<u>10.5</u>	<u>7.2</u>	<u>8.5</u>
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2003	Payment source from birth certificate	<u>73.7</u>	<u>89.7</u>	<u>84.1</u>
d) Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2003	Payment source from birth certificate	<u>70.8</u>	<u>81.4</u>	<u>77.5</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (MEDICAID ELIGIBILITY LEVEL)
STATE: MI

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2004	<u>185</u>
b) Medicaid Children (Age range <u>1</u> to <u>19</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2004	<u>150</u> <u> </u> <u> </u>
c) Pregnant Women	2004	<u>185</u>

FORM 18
HEALTH SYSTEMS CAPACITY INDICATOR #06 (SCHIP ELIGIBILITY LEVEL)
STATE: MI

INDICATOR #06 <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2004	<u>200</u>
b) Medicaid Children (Age range <u>1</u> to <u>19</u>) (Age range <u> </u> to <u> </u>) (Age range <u> </u> to <u> </u>)	2004	<u>200</u> <u> </u> <u> </u>
c) Pregnant Women	2004	<u>200</u>

FORM NOTES FOR FORM 18

None

FIELD LEVEL NOTES

None

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: MI

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	Yes
Annual linkage of birth certificates and WIC eligibility files	3	Yes
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

*Where:
1 = No, the MCH agency does not have this ability.
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
3 = Yes, the MCH agency always has this ability.

FORM 19
HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM
STATE: MI

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Other:		

HEALTH SYSTEMS CAPACITY INDICATOR #09C (Data Capacity) Overweight/Obesity
(The Ability of the State to Determine the Percent of Children Who are Obese or Overweight)

Data Source	Does your state participate in this survey/data source? (Select 1 - 3)*	Does your MCH program have direct access to this electronic database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	3	Yes
Pediatric Nutrition Surveillance System (PedNSS)	3	Yes
WIC Program Data	3	Yes
Other:		

*Where:

1 = No

2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.

3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

Notes:

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19

None

FIELD LEVEL NOTES

None

FORM 20
HEALTH STATUS INDICATORS #01-#05
MULTI-YEAR DATA
STATE: MI

HEALTH STATUS INDICATOR MEASURE # 01A

The percent of live births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	7.9	8.0	8.0	8.2	8.7
Numerator	10,706	10,714	10,403	10,778	11,150
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 01B

The percent of live singleton births weighing less than 2,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	6.2		6.2	6.4	6.4
Numerator	8,184		7,727	8,014	7,882
Denominator	131,607		124,941	126,038	123,575
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02A

The percent of live births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.6	1.7	1.6	1.7	1.6
Numerator	2,133	2,222	2,103	2,235	2,111
Denominator	136,048	133,247	129,518	130,850	128,271
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 02B

The percent of live singleton births weighing less than 1,500 grams.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	1.2		1.2	1.3	1.2
Numerator	1,568		1,535	1,659	1,453
Denominator	131,607		124,941	126,038	123,575
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03A

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	11.1		10.5	10.9	8.7
Numerator	240		228	228	182
Denominator	2,164,198		2,164,198	2,098,595	2,098,595
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03B

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	4.7	3.5	3.7	4.6	3.1
Numerator	102	75	79	96	65
Denominator	2,164,198	2,164,198	2,164,198	2,098,595	2,098,595
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 03C

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	24.7		24.0	22.5	20.5
Numerator	337		327	322	293
Denominator	1,363,706		1,363,706	1,432,436	1,432,436
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 04A

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	213.8		203.9	203.9	203.9
Numerator	4,628		4,325	4,279	4,259
Denominator	2,164,198		2,121,138	2,098,595	2,088,878
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04B

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	36.7		28.7	28.7	28.7
Numerator	795		608	602	600
Denominator	2,164,198		2,121,138	2,098,595	2,088,878
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	138.7		129.7	129.7	129.7
Numerator	1,891		1,838	1,858	1,869
Denominator	1,363,706		1,417,116	1,432,436	1,441,132
Is the Data Provisional or Final?				Provisional	Provisional

HEALTH STATUS INDICATOR MEASURE # 05A

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	22.8		26.8	27.7	33.8
Numerator	7,992		9,425	9,821	11,984
Denominator	351,139		352,136	354,931	354,931
Is the Data Provisional or Final?				Final	Provisional

HEALTH STATUS INDICATOR MEASURE # 05B

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

	2000	2001	<u>Annual Indicator Data</u>		2004
			2002	2003	
Annual Indicator	6.6		8.3	8.6	11.1
Numerator	11,892		14,866	15,223	19,570
Denominator	1,804,264		1,784,059	1,770,499	1,770,499
Is the Data Provisional or Final?				Final	Provisional

FORM NOTES FOR FORM 20

None

FIELD LEVEL NOTES

1. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2002
Field Note:
Estimate based on hospitalizations for injuries
2. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2003
Field Note:
Estimates based on 2002 data for hospitalizations for injuries
3. **Section Number:** Health Status Indicator #04A
Field Name: HSI04A
Row Name:
Column Name:
Year: 2004
Field Note:
Estimates based on 2002 data for hospitalizations for injuries
4. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2002
Field Note:
Estimates based on hospitalizations for injuries
5. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2003
Field Note:
Estimates based on 2002 datafor hospitalizations for injuries
6. **Section Number:** Health Status Indicator #04B
Field Name: HSI04B
Row Name:
Column Name:
Year: 2004
Field Note:
Estimates based on 2002 datafor hospitalizations for injuries
7. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2002
Field Note:
Estimate based on hospitalizations for injuries
8. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2003
Field Note:
Estimates based on 2002 data for hospitalizations for injuries
9. **Section Number:** Health Status Indicator #04C
Field Name: HSI04C
Row Name:
Column Name:
Year: 2004
Field Note:
Estimates based on 2002 data for hospitalizations for injuries

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #06A - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? Yes Is this data final or provisional? Provisional

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	128,829	100,487	24,349	515	3,478			
Children 1 through 4	521,011	403,784	98,992	3,126	15,109			
Children 5 through 9	679,567	525,151	130,608	6,122	17,686			
Children 10 through 14	758,788	583,508	152,516	6,829	15,935			
Children 15 through 19	734,898	589,978	122,115	6,621	16,184			
Children 20 through 24	705,497	572,159	107,941	6,349	19,048			
Children 0 through 24	3,528,590	2,775,067	636,521	29,562	87,440	0	0	0

HSI #06B - Demographics (Total Population) *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	121,228	7,601	
Children 1 through 4	490,271	30,740	
Children 5 through 9	642,153	37,414	
Children 10 through 14	724,643	34,145	
Children 15 through 19	704,001	30,897	
Children 20 through 24	670,222	35,275	
Children 0 through 24	3,352,518	176,072	0

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #07A - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	210	68	139	0	1	0	0	2
Women 15 through 17	3,813	2,186	1,531	23	30	2	0	41
Women 18 through 19	8,345	5,589	2,521	84	80	6	0	65
Women 20 through 34	98,793	77,532	16,197	539	3,483	268	0	774
Women 35 or older	17,098	14,078	2,049	55	692	78	0	146
Women of all ages	128,259	99,453	22,437	701	4,286	354	0	1,028

HSI #07B - Demographics (Total live births) *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	185	23	2
Women 15 through 17	3,320	394	99
Women 18 through 19	7,417	704	224
Women 20 through 34	89,877	5,927	2,989
Women 35 or older	15,925	715	458
Women of all ages	116,724	7,763	3,772

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	969	515	385	4	6	3	0	56
Children 1 through 4	130	82	40	0	2	0	0	6
Children 5 through 9	100	63	35	0	1	0	0	1
Children 10 through 14	134	89	38	2	0	0	0	5
Children 15 through 19	459	339	116	1	0	0	0	3
Children 20 through 24	569	373	168	7	4	1		16
Children 0 through 24	2,361	1,461	782	14	13	4	0	87

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	899	52	18
Children 1 through 4	122	7	1
Children 5 through 9	96	2	2
Children 10 through 14	131	2	1
Children 15 through 19	443	13	3
Children 20 through 24	545	18	6
Children 0 through 24	2,236	94	31

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #09A - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	2,823,093	2,202,908.0	528,580.0	23,213.0	68,392.0				2004
Percent in household headed by single parent	31.8	24.3	69.2	52.4	9.8		42.9	30.8	2004
Percent in TANF (Grant) families	5.1	32.1	66.4	0.4	0.8			1.1	2004
Number enrolled in Medicaid	948,873	559,864.0	356,533.0	5,714.0				26,762.0	2004
Number enrolled in SCHIP	56,643	38,940.0	7,228.0	491.0				9,984.0	2004
Number living in foster home care	18,974	8,453.0	9,552.0	194.0	42.0	45.0	633.0	55.0	2004
Number enrolled in food stamp program	477,073	238,642.0	230,198.0	2,550.0	5,211.0			472.0	2004
Number enrolled in WIC	222,370	128,307.0	64,710.0	1,557.0	3,113.0			24,683.0	2004
Rate (per 100,000) of juvenile crime arrests	4,216.2	4,066.1	4,754.3	1,491.0	725.4				2004
Percentage of high school drop-outs (grade 9 through 12)	4.1							4.1	2004

HSI #09B - Demographics (Miscellaneous Data) *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	2,682,296.0	141,227.0		2004
Percent in household headed by single parent			31.8	2004
Percent in TANF (Grant) families	94.6	5.4		2004
Number enrolled in Medicaid	888,043.0			2004
Number enrolled in SCHIP			56,643.0	2004
Number living in foster home care	18,154.0	820.0		2004
Number enrolled in food stamp program	447,006.0	30,067.0		2004
Number enrolled in WIC	197,687.0	24,683.0		2004
Rate (per 100,000) of juvenile crime arrests	4,410.5	576.6		2004
Percentage of high school drop-outs (grade 9 through 12)			4.1	2004

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #10 - Demographics (Geographic Living Area) *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

GEOGRAPHIC LIVING AREAS	TOTAL
Living in metropolitan areas	2,392,951
Living in urban areas	2,147,856
Living in rural areas	736,209
Living in frontier areas	0
Total - all children 0 through 19	2,884,065

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #11 - Demographics (Poverty Levels) *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Total Population	9,893,000.0
Percent Below: 50% of poverty	5.4
100% of poverty	11.4
200% of poverty	28.9

FORM 21
HEALTH STATUS INDICATORS
DEMOGRAPHIC DATA
STATE: MI

HSI #12 - Demographics (Poverty Levels) *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2004 Is this data from a State Projection? No Is this data final or provisional? Provisional

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	2,765,000.0
Percent Below: 50% of poverty	7.2
100% of poverty	14.6
200% of poverty	35.6

FORM NOTES FOR FORM 21

None

FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A
Field Name: HSIRace_Children
Row Name: All children 0 through 19
Column Name:
Year: 2006
Field Note:
2004 data is estimated based on 2003 population ratios
2. **Section Number:** Indicator 09A
Field Name: HSIRace_SingleParentPercent
Row Name: Percent in household headed by single parent
Column Name:
Year: 2006
Field Note:
Estimate based on 2003 data
3. **Section Number:** Indicator 09A
Field Name: HSIRace_WICNo
Row Name: Number enrolled in WIC
Column Name:
Year: 2006
Field Note:
2004 data is not yet available. Data reported is from 2003
4. **Section Number:** Indicator 09A
Field Name: HSIRace_JuvenileCrimeRate
Row Name: Rate (per 100,000) of juvenile crime arrests
Column Name:
Year: 2006
Field Note:
Data is based on 2003 reports
5. **Section Number:** Indicator 09A
Field Name: HSIRace_DropOutPercent
Row Name: Percentage of high school drop-outs (grade 9 through 12)
Column Name:
Year: 2006
Field Note:
Based on 2003 data
6. **Section Number:** Indicator 09B
Field Name: HSIEthnicity_Children
Row Name: All children 0 through 19
Column Name:
Year: 2006
Field Note:
2004 Data is estimated based on ratios from 2003 population
7. **Section Number:** Indicator 11
Field Name: S11_total
Row Name: Total Population
Column Name:
Year: 2006
Field Note:
Estimate based on Current Population Survey, Annual Social and Economic Supplement, 2004
8. **Section Number:** Indicator 12
Field Name: S12_Children
Row Name: Children 0 through 19 years old
Column Name:
Year: 2006
Field Note:
Estimate based on Current Population Survey, Annual Social and Economic Supplement, 2004

NEW STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET
STATE: MI

SP # 1

PERFORMANCE MEASURE: Percent of Medicaid-enrolled women who are screened for maternal depression

GOAL

DEFINITION

Numerator:

Number of Medicaid-enrolled women screened for maternal depression

Denominator:

Number of Medicaid-enrolled women

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES Medicaid database

SIGNIFICANCE

OBJECTIVE

2006	2007	2008	2009	2010
20	25	30	35	40

SP # 2

PERFORMANCE MEASURE:

Percent of low birthweight births (<2500 grams) among live births.

GOAL

To reduce the number of live births with low birthweight

DEFINITION

Numerator:

Number of live births with birthweight less than 2500 grams

Denominator:

Number of live births

Units: 100 Text: percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, MDCH PERCENT OF LIVE BIRTHS WITH LOW BIRTH WEIGHT (LESS THAN 2500 GRAMS) 1996 1997 1998 1999 2000 N % N % N % N % N % Total 10228 7.7 10335 7.8 10468 7.9 10703 8.0 10706 7.9 Non-Hispanic White 6384 6.4 6439 6.6 6424 6.5 6393 6.5 6385 6.4 Non-Hispanic Black 3270 13.6 3194 13.3 3336 13.9 3495 14.7 3508 14.6 American Indian 43 6.1 44 6.0 47 6.8 45 6.7 38 6.0 Asian/Pacific Islander 148 6.1 214 7.7 231 7.7 280 8.4 244 6.7 Hispanic 307 6.1 365 6.7 389 6.5 415 6.7 431 6.2

SIGNIFICANCE

Baseline: 7.9 percent of live births weight (less than 2,500 grams) in Michigan, 2000. The percent of live births with low birthweight for Non-Hispanic Black live birhs is twice that for Non-Hispanic White live births and all other racial groups.

OBJECTIVE

2006	2007	2008	2009	2010
8.2	8.1	8	7.9	7.8

SP # 3

PERFORMANCE MEASURE:

Percent of preterm births (<37 weeks gestation) among live births

GOAL

To reduce the percentage of preterm births (less than 37 weeks of gestational age)

DEFINITION

Numerator:

Number of preterm infants with less than 37 weeks of gestational age

Denominator:

Number of live infants

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics Michigan Department of community Health PERCENT OF PRETERM INFANTS (LESS THAN 37 WEEKS OF GESTATIONAL AGE) 1996 1997 1998 1999 2000 N % N % N % N % N % Total 13778 10.3 14319 10.7 14646 11.0 14368 10.8 14833 10.9 Non-Hispanic White 8919 8.9 9277 9.3 9561 9.6 9326 9.5 9579 9.6 Non-Hispanic Black 3985 16.6 4019 16.6 4033 16.7 3985 16.8 4023 16.8 American Indian 77 9.9 85 11.7 84 12.1 68 10.1 72 11.4 Asian/Pacific Islander 219 9.1 264 9.5 299 10.0 297 8.9 342 9.4 Hispanic 505 10.0 597 11.0 636 10.7 627 10.1 722 10.4

SIGNIFICANCE

Baseline: 10.9 percent of pre-term births among all live births in Michigan 2000. The current percent of preterm births is about 45% higher than the Healthy People 2010 objective. The percent of pre-term infants for Non-Hispanic Black is 1.7 times that for Non-Hispanic White, and much higher than other racial groups.

OBJECTIVE

2006	2007	2008	2009	2010
11	11	10.9	10.9	10.8

SP # 4

PERFORMANCE MEASURE:

Percent of live births resulting from unintended pregnancies.

GOAL

To reduce the percent of live births resulting from unintended pregnancies

DEFINITION

Number of live births resulting from unintended pregnancies divided by total number of live births multiplied by 100.

Numerator:

Number of live births which result from unintended pregnancies

Denominator:

Number of live births

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Pregnancy Risk Assessment Monitoring System (PRAMS) Michigan Department of Community Health PERCENT OF LIVE BIRTHS RESULTED FROM UNINTENDED PREGNANCIES 1996 1997 1998 1999 2000 Unintended pregnancies 43.1% 43.2% 41.8% 39.8% 40.2% RACE Black 71.0% 69.0% 68.2% 67.9% 64.0% Non-Black 37.0% 38.4% 37.0% 35.0% 35.8% AGE < 20 84.3% 81.3% 73.7% 86.1% 70.7% 20 - 29 42.6% 44.9% 46.0% 41.0% 42.2% 30 + 28.1% 27.2% 22.6% 24.8% 27.1%

SIGNIFICANCE

Baseline:40.2 percent of live births resulting from unintended pregnancies in Michigan, 2000. Significant disparities between racial and age groups.

OBJECTIVE

2006	2007	2008	2009	2010
38.7	38.3	37.8	37.3	37.3

SP # 5

PERFORMANCE MEASURE:

Increase the percent of Medicaid enrolled children, 0-6 years of age, who receive lead screening

GOAL

To increase the percent of Medicaid enrolled children 0-6 years of age who receive lead screening

DEFINITION

Numerator:

Number of Medicaid enrolled children 0-6 years of age who receive lead screening

Denominator:

Total number of Medicaid enrolled children 0-6 years of age

Units: 100 **Text:** percentage

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division of Family and Community Health Michigan Department of Community Health

SIGNIFICANCE

In 2001, there were 52,946 (17.9%) among 296,312 Medicaid enrolled children 0 to 5 years of age received lead screening.

OBJECTIVE

2006	2007	2008	2009	2010
70	80	85	90	90

SP # 6

PERFORMANCE MEASURE:

Maternal mortality ratio in Black women

GOAL

To reduce the maternal mortality ratio in Black women

DEFINITION

Numerator:

Number of deaths to Black women while pregnant or within 42 days of termination from a cause related or aggravated by the pregnancy or its management, but not from accidental or incidental causes.

Denominator:

Number of live births to Black women

Units: 100000 **Text:** ratio

HEALTHY PEOPLE 2010 OBJECTIVE

DATA SOURCES AND DATA ISSUES

Division for Vital Records and Health Statistics, MDCH MATERNAL MORTALITY RATIO (100,000 LIVE BIRTHS) 1996 1997 1998 1999 2000 Mortality ratio 3.9 9.3 6.2 8.2 6.6 (1/100,000) Number by race White* 2 6 2 8 5 Black* 3 6 5 3 4

SIGNIFICANCE

Baseline: 6.6 maternal deaths per 100,000 live births in Michigan, 2000. A significant racial disparity exist with maternal deaths. The number of maternal deaths in Black women contributed a big portion of the overall maternal mortality ratio in Michigan.

OBJECTIVE

2006	2007	2008	2009	2010
36	35	35	34	34

SP # 7

PERFORMANCE MEASURE:

Rate of breastfeeding at six months

GOAL

The increase the duration of breastfeeding to at least six months

DEFINITION

Numerator:

The number of mothers in the WIC program who continue to breastfeed their infants at six months of age.

Denominator:

The number of mothers enrolled in WIC

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

Objective 16-19b

Increase the proportion of mothers who breastfeed their babies at 6 months

DATA SOURCES AND DATA ISSUES

WIC data

SIGNIFICANCE

The advantages of breastfeeding are indisputable and include nutritional, immunological and psychological benefits to both infant and mother

OBJECTIVE

2006	2007	2008	2009	2010
30	35	40	45	50

SP # 8

PERFORMANCE MEASURE:

Percent of WIC-enrolled children who are overweight

GOAL

Reduce the percent of WIC-enrolled children who are overweight

DEFINITION

Numerator:

Number of infants and children enrolled in WIC who are overweight (≥ 95 th percentile)

Denominator:

Number of infants and children enrolled in WIC

Units: 100 **Text:** Percent

HEALTHY PEOPLE 2010 OBJECTIVE

19-3

Reduce the proportion of children and adolescents who are overweight or obese

DATA SOURCES AND DATA ISSUES

WIC program data WIC is the only source of routine data on the weight status of children; no population-based data is available

SIGNIFICANCE

Official statewide data for younger Michigan children are not available but, in the samples collected in recent years and in high school students studied in the Youth Risk Behavior Survey, Michigan children are similar to children across the nation.

OBJECTIVE

2006	2007	2008	2009	2010
12.5	12.3	12.1	12	11.8

SO # 1

OUTCOME MEASURE:

Ratio of Native American infant mortality to the white infant mortality rate

GOAL

To reduce the disparity between the Native American infant mortality rate and the white infant mortality rate

DEFINITION

Numerator:

average rate of Native American infant mortality for three previous years

Denominator:

average rate of white infant mortality for three previous years

Units: 1 **Text:** Ratio

HEALTHY PEOPLE 2010 OBJECTIVE

HP Objective 16-1 Reduce fetal and infant deaths

DATA SOURCES AND DATA ISSUES

Division of Vital Records and Health Statistics, matched birth and death files

SIGNIFICANCE

The gap between Native American and white infant mortality has increased from 37% in 1999 to 90% in 2003

OBJECTIVE

2006	2007	2008	2009	2010
1.8	1.7	1.7	1.6	1.6

